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7590

06/24/2004

Licata & Tyrrell P.C.
66 East Main Street
Marlton, NJ 08053

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Kathleen A. Tyrrell	38,350	(Depositor's name)
<i>Kathleen A. Tyrrell</i>		(Signature)
August 23, 2004		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/038,561

11/09/2001

Madeline Odgaard

IRD-0014

7143

TITLE OF INVENTION: MEMBRANE ELECTRODE ASSEMBLIES FOR DIRECT METHANOL FUEL CELLS AND METHODS FOR THEIR PRODUCTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
RUTHKOSKY, MARK	1745	429-041000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

IRD Fuel Cell A/S

Svendborg, Denmark

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 12

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1619 (enclose an extra copy of this form).

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(Authorized Signature)

Kathleen A. Tyrrell

(Date)

Kathleen A. Tyrrell

August 23, 2004

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08/26/2004 DEMMANU2 00000104 10038561

01 FC:2501

665.00 OP

02 FC:1504

300.00 OP

03 FC:8001

36.00 OP

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